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Request
For
Continued Examination (RCE)
Transmittal
ess to: MS RCF

Address to: MS RCE

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Application Number	10/674,017
Filing Date	September 30, 2003
First Named Inventor	BAEK, Myoung Kee
Art Unit	1792
Examiner Name	TALBOT, BRIAN K
Attomey Docket No.	8734.240 US

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.

Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.

s, 1995, or to any desig	ir application.						
amendments enc	quired under 37 CFR 1.114 Note: If the Rollosed with the RCE will be entered in the order in the have any previously filed unentered and	n which they were filed	unless applica	nt instructs otherwise. If			
a. X Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.							
i. X Co	nsider the arguments in the Amendment previously filed on			March 4, 2010			
ii Oth	ner						
b. Enclose	ed						
i. Am	i. Amendment/Reply iii. Information Disclosure Statement (IDS)						
ii. Affi	idavit(s)/Declaration(s) iv.	Other					
2. Miscellaneous							
a. Susper	nsion of action on the above-identified appl	ication is requested	under 37 CFF	R 1.103(c) for a			
period (of months. (Period of suspens	on shall not exceed 3 r	nonths; Fee un	der 37 CFR 1.17(i) required)			
b. Other							
3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.							
a. The Director is hereby authorized to charge any additional fees, or credit any overpayments, associated with filing this Request for Continued Examination to Deposit Account No. 50-0911.							
i. X RCE fee required under 37 CFR 1.17(e)							
ii. X Extension of time fee (37 CFR 1.136 and 1.17)							
				· · · · · · · · · · · · · · · · · · ·			
b. Check in the amount of \$ enclosed							
c. X Please charge my Deposit Account No. <u>50-0911</u> in the amount of \$ <u>940.00</u> to cover the above fees.							
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED							
Name (Print/Type)	Eric J. Nuss-	Registration No. (Att	orney/Agent)	40,106			
Signature	Que Mus	Date	April 2, 2	010			